Name In Full

Certificate of Death

Joseph. Edmond Bailey

Died at Town: St. michaels County: Talbot MARYLAND

Date 189 9 Month: 7th Day: 8 — Age Y. 3 M. — D. — Native of St michaels Occupation —

Male ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ Colored Single ~~Widower~~ Number ~~of children~~ living

Husband of —
Wife

Father's Name Jno Bailey

Mother's Name Maggie Bailey

Cause of Death — Primary: Entero-Colitis — How long sick: Three weeks

Immediate: Debility — ~~Accident~~, Suicide, ~~Homicide~~

Reported by A. B. Blakcock M. D

Address St, Michaels Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 75PBR

Attended by Dr. _____

of _____

Name in Full

Certificate of Death

Rena Bailey

Town: St Michaels County: Talbot

Died at St Michaels Talbot MARYLAND

Date 1899 Month 7 Day 22 | Age Y. - M. 8 D. - | Native of St Michaels | Occupation —

~~Male~~ Female ~~White~~ Colored ~~Married~~ Single ~~Widow~~ Widower ~~Divorced~~ ~~Number of children living~~

Husband of —

Wife —

Father's Name Leo Mitchell

Mother's Name Anna Jones

Cause of Death: Primary Bright's Disease — How long sick 6 months

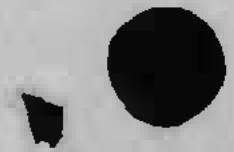
Immediate Convulsions — ~~Accident, Suicide, Homicide~~

Reported by A. B. Glascock M.D.

Address St. Michaels "Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968



Name in Full

Certificate of Death

Mida Banks

Died at Town Trappe County Talbot — MARYLAND

Date 189 9 Month July Day 9 | Age Y. 30 M. — D. — | Native of Md | Occupation Servant

~~Male~~ Female ~~White~~ Colored ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

Husband of

Wife

Father's Name — Banks

Mother's Name Annie Green

Cause of Death: Primary Appendicitis

Immediate Peritonitis

How long sick 8 days

~~Accident, Suicide, Homicide~~

Reported by Wm S. Seymour

Address Trappe Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Herman Bantum — Certificate of Death

Died at Town Easton — County Talbot — MARYLAND

Date 1899 Month July Day 22 — Age Y. 9 M. D. — Native of Md — Occupation child

Male / ~~Female~~ — ~~White~~ / Colored — ~~Married~~ / ~~Single~~ — ~~Widow~~ / ~~Widower~~ — ~~Divorced~~ / ~~Number of children living~~

Husband / Wife of —

Father's Name J. B. Bantum — Mother's Name

Cause of Death: Primary Phthisis — How long sick About a year

Immediate Exhaustion — Accident, Suicide, Homicide

Reported by Julius A Johnson

Address Easton Md b-27

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, [illegible]

142

Name in Full Joseph Franklin Bateman — Certificate of Death

Died at Town Easton County Talbot — MARYLAND

Date 189 9 Month July Day 7 | Age Y. 47 M. 4 D. 14 | Native of Easton | Occupation Lawyer

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ Widower | ~~Divorced~~ Number of ~~children living~~

Husband of X
Wife 1422

Father's Name Henry E Bateman — Mother's Name Ariana Bateman

Cause of Death: Primary Mental depression — How long sick a few hours

Immediate Pistol Wound — ~~Accident~~, Suicide, ~~Homicide~~

Reported by E R Riffle

Address Easton Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79698

Name in Full — Certificate of Death

Alonta Downes

Died at Town Easton Md County Talbot MARYLAND

Date 1899. Month 7 Day 2 | Age Y. 24 M. — D. — | Native of Md. | Occupation Servant.

~~Male~~ Female ~~White~~ Colored ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living

Husband / Wife of —

Father's Name Alfred Downes Mother's Name Mary Bidgell

Cause of Death: Primary Acute Peritonitis 93 How long sick 1 week

Immediate Exhaustion.

~~Accident, Suicide, Homicide~~

Reported by Thos. A. Councell M.D.

Address Easton. Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, BOSTON

Name in Full Philip Marion Hopkins

Certificate of Death

Died at Town near Easton County Talbot MARYLAND

Date 189 Month 7 Day 14 | Age Y. infant M. D. | Native of | Occupation

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

Husband of
Wife

Father's Name Philip H. Hopkins

Mother's Name

Cause of Death: Primary 161 — How long sick

Immediate — Accident, Suicide, Homicide

Reported by Star Democrat

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79008

Rev. Edw. R. Rich.

Name in Full — Certificate of Death

Olyve Hynson

Died at Town: Easton County: Talbot — MARYLAND

Date 1899 Month 7 Day 2 | Age Y. 23 M. 10 D. 28 | Native of Md | Occupation Carpenter

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ Number of children living

~~Husband~~ ~~Wife~~ of

Father's Name Chas Hynson — Mother's Name Rosanna Hynson 1526

Cause of Death: Primary Stab wound — Jugular — How long sick 5 hours

Immediate Future Hemorrhage. ~~Accident, Suicide~~, Homicide

Reported by E R Tibbs, H. A Council

Address Easton, Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, BOSTON

Name in Full

Certificate of Death

Perry S. Love

Died at Town Easton County Talbot MARYLAND

Date 189 9 Month 7 Day 2 | Age Y. 78 M. D. | Native of | Occupation

Male ~~Female~~ | White ~~Colored~~ | Married | Widow | Divorced

Single | Widower | Number of children living

Husband of

Wife

Father's Name

Mother's Name

Cause of Death { Primary 1161 | How long sick

Immediate | Accident, Suicide, Homicide

Reported by Easton Ledger

Address 7-6

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70898

Name in Full

Agnes Perkins

Certificate of Death

Died at Town: Easton County: Talbot Co. MARYLAND

Date 189 4 Month: July Day: 9 Age: Y 26 M. D. Native of: Talbot Co. Md Occupation: Housewife

~~Male~~ Female ~~White~~ Colored Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living 4

~~Husband~~ Wife of Wm A. Perkins

Father's Name: James S. Skinner Mother's Name: Mary J. Skinner

Cause of Death: Primary: Tuberculosis 22 al How long sick: 1 year

Immediate: Exhaustion

~~Accident Suicide Homicide~~

Reported by: T. B. Merritt

Address: Easton, Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Annie Rittenhouse — Certificate of Death

Died at Town — County Talbot — MARYLAND

Date 189 Month July Day 8th — Age Y. 4 M. 1 D. — Native of Md — Occupation —

~~Male~~ / Female — White / ~~Colored~~ — ~~Married~~ / ~~Single~~ — ~~Widow~~ / Widower — ~~Divorced~~ / Number of children living

Husband / Wife of

Father's Name J. Ray Rittenhouse — Mother's Name 12a

Cause of Death — Primary: Acute Indigestion — Immediate: Exhaustion — How long sick 24 hours

~~Accident Suicide Homicide~~

Reported by Julius A. Johnson

Address Easton Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, FORM

Name In Full

Certificate of Death

Elizabetha A. Stokes

Died at St. Michaels (Town) Talbot (County) MARYLAND

Date 1899 Month 7 Day 14 | Age Y. 54 M. 1 D. 6 | Native of St Michaels | Occupation Housewife

~~Male~~ Female | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ | Number of children living Five

~~Husband~~ Wife of Wm. H. Stokes

Father's Name Perry D. Porter | Mother's Name Mary A. Porter

Cause of Death — Primary: Organic Heart disease — How long sick 18 months

Immediate: Heart failure — ~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by A. B. Hasecock M.D.

Address St Michaels Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79888

Attended by Dr. _____

of _____

Seen by Coroner _____

of _____

Name in Full Fred. J. Thomas — Certificate of Death

Town — County Talbot — MARYLAND

Died at

Date 189 — Month July — Day 11th — Age Y. 16 M. 11 D. — Native of Md — Occupation

Male — White — ~~Married~~ — ~~Widow~~ — ~~Divorced~~

~~Female~~ — ~~Colored~~ — Single — Widower — ~~Number of children living~~

Husband / Wife of

Father's Name Geo. W. Thomas — Mother's Name Lizzie C. Thomas

Cause of Death — Primary Phthisis 2 2 ca — How long sick 6 mo

Immediate Exhaustion from diarrhoea — ~~Accident, Suicide, Homicide~~

Reported by Julius A. Thomas

Address Easton Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU 65688

Name in Full

Certificate of Death

Ella Virginia Tyler

Died at Town: Newcatts B.C.N. County: Talbot MARYLAND

Date 1899 Month: July Day: 12 | Age Y.: 12 M.: 6 D.: | Native of: Talbot Co | Occupation: —

~~Male~~ Female | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | Divorced | Number of children living

Husband / Wife of —

Father's Name: Geo. E. Tyler

Mother's Name: Lydia Virginia Tyler

Cause of Death: Primary: Diphtheria — How long sick: 7 Days

Immediate

~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by R. A. Woolson

Address Michaels Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, FORM

Mr. H. S. Conner

Easton

Md.

Name in Full Ruth Tyler

Certificate of Death

Town Neavitt, B.C.N. County Talbot. MARYLAND

Died at

Date 189 7 Month July Day 21. | Age Y. 8 M. D. | Native of Maryland | Occupation

Male / ~~Female~~

White / Colored

~~Married~~ / Single

Widow / ~~Widower~~

Divorced

Number of children living

Husband / Wife of

Father's Name Geo. Tyler

Mother's Name Lydia Tyler

Cause of Death: Primary Diphtheria

Immediate

How long sick One

~~Accident, Suicide, Homicide~~

Reported by R. A. Robinson

Address St Michaels Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, FORM

Mr. Jas. Connell

Canton

Indian Co Md.

Name in Full Wright

Certificate of Death

Died at Town Easton County Talbot MARYLAND

Date 189 9 Month 7 – Day 4 | Age Y. – M. 3 – D. | Native of Md | Occupation —

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ Widower | ~~Divorced~~ ~~Number of children~~ living

~~Husband~~ ~~Wife~~ of

Father's Name H. J. Wright

Mother's Name Mary E. McGill

Cause of Death: Primary Cerebro Spinal Meningitis — How long sick 1 week

Immediate Exhaustion 396

~~Accident, Suicide, Homicide~~

Reported by Thos. A. Emerick M.D.

Address Easton Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, FORM 8